

User Guide









Preface

This User Guide is intended to provide information and guidance to those police

officers and staff who are involved either in referring officers for treatment at the Police

Treatment Centres or promoting the work of the Charity to their colleagues.

The guide contains:

• Information about the Charity and its governance

• The two key policies that reflect the Charity's governing documents and how the

Charity's benefits may be applied

Frequently asked questions

• Sample completed application form to show the level of detail requested

While it is difficult to consider every potential question that may be raised, I hope we

have covered most of the areas of information that we are frequently asked about and

over time this section will grow to encompass newly raised issues.

In addition to information that will assist in referring officers to the Police Treatment

Centres also included in this User Guide is our standard promotional information. This

will undoubtedly be of interest to those officers and staff who help us to raise

awareness and encourage officers, particularly new recruits, or transferees, to donate

to the Charity.

This User Guide will be updated with any changed or additional information twice

yearly in January and July. If you have suggestions about information or other material

that could usefully be included in this guide please email details to

enquiries@thepolicetreatmentcentres.org.

Michael Baxter, QPM

Chief Executive

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About Us

The Police Treatment Centres is a registered Charity which was founded by Catherine Gurney, OBE, more than one hundred years ago in 1898. The Charity is not part of government or statutory police force arrangements e.g. police authority.

The Charity provides two Treatment Centres where serving and retired police officers can receive rest, recuperation and treatment following an illness or injury with the aim of assisting their return to better health and wellbeing. The Centres are St Andrews in Harrogate, North Yorkshire, and Castlebrae in Auchterarder, Perthshire.

The Police Treatment Centres charitable objectives are dedicated to supporting police officers. The Charity's priority is the treatment of serving police officers and, where capacity and demand allow, retired police officers. There is a unique perspective on the treatment police officers require and eeach patient receives an individually tailored programme of job specific treatment which is delivered in a friendly and welcoming environment. Treatment is provided on both an IN and OUT patient basis.

Each year almost 4000 officers attend the Centres for treatment. The majority do so to receive intensive physiotherapy while the remainder attend for a variety of reasons such as: to recover from an operation; cardio rehab following a stroke; to seek assistance for stress, anxiety and other such conditions; for respite.

The Charity is supported by voluntary donations from serving police officers primarily in the northern forces of England and Wales, Scotland and Northern Ireland, but also from British Transport Police, Civil Nuclear Constabulary and the Isle of Man.

Governance is provided by the Charity's Sealed Schemes (governing documents) which provide for a Board of Trustees drawn from the Police Federation, Superintendents Association and Chief Officers. The Board of Trustees provides strategic guidance through business planning; agrees and sets an annual budget; and monitors activity and service provision through regular reports on service delivery, the Annual Business Plan and annual budget.

The management of operations is overseen by the Chief Executive of the Charity who is supported by Heads of Department in: Catering; Facilities; Nursing and Physiotherapy; Finance and Admin; Human Resources; and PR and Fundraising.

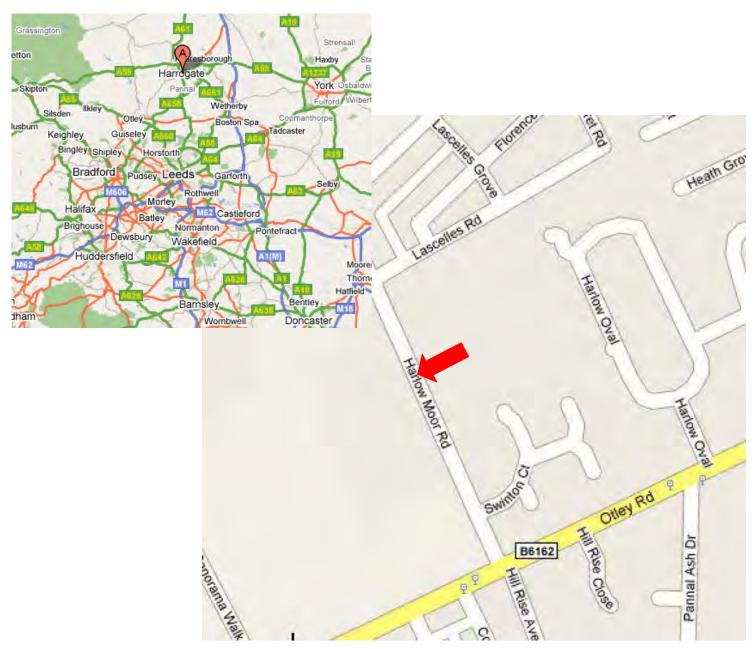
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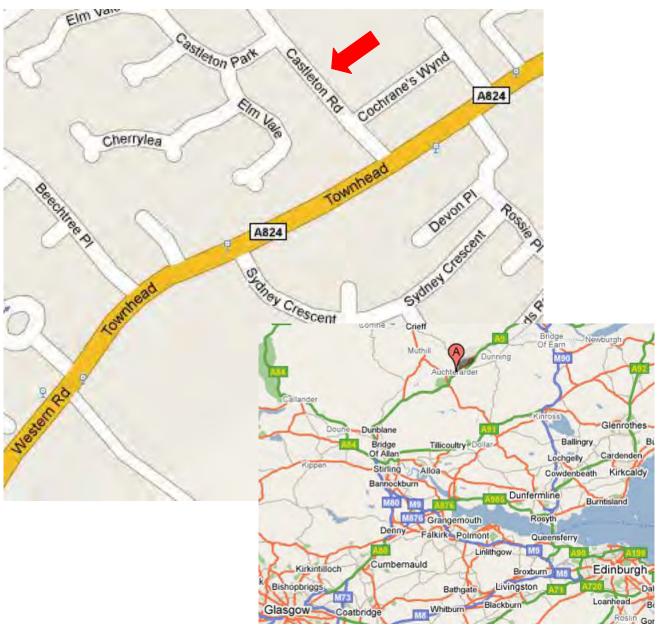
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Eligibility Policy and criteria

Policy Number:	To be added	Responsible Manager:	Chief Executive
Date of issue:	Board of Trustees:- Approved: 21 November 2008 Effective: 1 January 2009 Revised: 1 January 2010 13 May 2010 1 January 2011 1 January 2012	Policy Review:	Annually OR, where legislative or other issues prompt an earlier review

Policy Statement:

The Police Treatment Centres (PTC and 'the Charity') is a registered Charity with both the Charity Commission in England and Wales and also the Office of Charity Regulator in Scotland (OSCR). This policy has been developed from the content of the Charity's 'Sealed Schemes' (governing documents) held by those regulatory bodies.

The income of the Charity is mainly supported by serving police officers, in police forces comprising the Charity's 'constituency', who make a voluntary donation to the Charity, normally though monthly payroll giving (Give as You Earn - GAYE), the value of which is reviewed annually and expressed as a weekly amount.

This policy sets out the framework by which:

- Serving police officers who make the voluntary donation may receive advice and treatment from the Charity 'free of charge', and,
- Retired police officers, who made the weekly voluntary donation during their police service, may receive advice and treatment from the Charity 'free of charge'.

The priority aim within the Charity's Sealed Schemes (governing documents) is that serving police officers receive priority for treatment and that the Trustees have discretion where capacity (occupancy, treatment and financial) allows to consider retired police officers who may request admission for treatment.

All decisions on admission for treatment will always be based on the merits of each individual case and admission prioritised on the need for treatment.

The definition of 'police officer' and 'retired police officer' are contained within the policy

Purpose:

The purpose of this policy is:

To provide clarity in the eligibility for treatment of serving police officers who
make the voluntary donation to the Charity



- To provide clarity in the eligibility for treatment of retired officers who made the voluntary donation to the Charity whilst serving officers
- Provide a framework in which applications for admission can be considered from serving and retired police officers who are, or were when serving, nondonors to the Charity.

Legal Safeguard:

The contents of this policy have been drafted in accord with the 'Sealed Schemes' (governing documents) of the Charity and policy decisions made by the Board of Trustees acting in accord with those Sealed Schemes.

Application of the Policy:

This policy will be applied pragmatically and with sympathetic consideration of all the issues involved in any particular case.

Note:

All decisions on admission for treatment will always be based on the merits of each individual case and admission prioritised on the need for treatment.

Responsibility for application of the policy:

The responsibility for the application of the policy will be that of the Chief Executive. An applicant for admission who believes that they have been unfairly treated under this policy, or their representative, should in the first instance raise the matter, normally in writing (including email), with the Chief Executive.

Should the matter not be resolved by the Chief Executive the applicant, or their representative, should without undue delay bring the matter to the attention, normally in writing (including email), of the Chair of the Board of Trustees who will take under consideration the matters raised.

Eligibility Criteria:

- a) Individuals normally eligible for the Charity's benefits and provision of treatment 'free of charge' are:
 - i. Serving police officers who hold the 'office of Constable', or,
 - ii. Who were serving police officers holding the 'office of Constable' and are now in receipt of a non-deferred police pension.

AND

b) Who, during their police service contribute, or contributed, a voluntary donation to support the Charity's aims and objectives.

Individuals not normally eligible for treatment free of charge are:

- Serving officers who <u>do not</u> make the voluntary donation.
- Retired police officers who <u>did not</u> make the voluntary donation during their police service



- Former police officers who <u>are not</u> on a police pension e.g. resigned, required to resign, dismissed or otherwise left the service.
- Former police officers who are now in receipt of a <u>deferred police pension</u> having, for whatever reason, prematurely terminated their full term of police service e.g. resigned, required to resign, dismissed or otherwise left the service.

*Note: 'receive a police pension' means:

- Retired on completion of specified term e.g. 30 years service
- Retired upon reaching age limit e.g. 60 years of age
- Retired upon discharge by reason of disability or other medical grounds Such individuals will have been allocated a force 'police pension number'.

Non-donors:

The Board of Trustees are mindful of the fact that there are many reasons why a police officer does not make the voluntary payroll giving donation but that the officer may at some point in their service wish to begin contributing the payroll giving voluntary donation to support the Charity. There are occasions where not withstanding that the officer is a non-donor they may seek treatment from the Charity.

The Board of Trustees have examined the respective positions of student officers within their probationary period and those officers who have completed their probationary period. The Trustees recognise that to successfully complete a probationary period an officer must be both physically and mentally fit and this is a 'benchmark' that can be utilised within eligibility policy decisions.

Therefore, the Board of Trustees have agreed that:

- Where a police officer is within their probationary period, normally two years, they may commence contributing the payroll giving voluntary donation to the Charity without a time restriction period on admission for treatment being applied, however,
- Where a police officer who has two years service or more commences contributing the weekly voluntary donation to the Charity and applies for admission for treatment there will be a <u>twelve month</u> time restriction period on being admitted for treatment, <u>UNLESS</u>,
- Where an officer wishes to apply for treatment within the time restricted period they, or a third party e.g. their force or force benevolent arrangements, supports the Charity with a contribution of 'a suggested donation' equal to the average cost of a two week admission period for treatment or such an amount that may be reasonably agreed by the Charity.

The Trustees retain the discretion to consider each application from a non-donor on the merits of the particular case presented and take into account unique and/or significant circumstances that may apply when considering the proposed charge for admission and treatment, e.g. extreme financial hardship.

The average cost of admission for treatment will be reviewed annually and may therefore increase or decrease in accord with the Charity's annual running costs. On 1 December 2011 the average cost of a two week admission for treatment was £1,000 (12 days at £83.50 per day).



*Note: In January 2009 this policy replaced a previous policy agreed by the Board of Trustees in 1998, and re-issued on 8 December 2003, that set the criteria at 'up to five (5) years service' and 'five (5) years service and over' in respect of non- donors.

Recovery of PTC costs within personal injury claims:

In circumstances where an officer attends for treatment for an injury or illness that was caused by an event for which a third party is subject to a claim for compensation in respect of personal injury the PTC will seek 'rights of subrogation' (see below) to ensure recovery of the officers PTC treatment costs against third parties, in such cases the following policy statement will apply:

'The Police Treatment Centres will be entitled to claim on behalf of any current serving officer or retired officer whom has been provided with treatment, the use of facilities and services at The Police Treatment Centres the cost of such treatment and cost of use of such facilities and services from third parties against whom a claim for personal injuries is brought'

The PTC Application for Admission Form contains two sections where an officer undertaking a claim for compensation from a third party is requested to provide information and an endorsement prior to treatment being received.

Note: <u>Subrogation</u> is a legal term regarding the substitution of one claim for another, especially the transfer of the right to receive payment of a debt to somebody other than the original creditor. In this case it is the cost of treatment reimbursed to the PTC.

Related eligibility matters:

Officers transferring between police forces:

There is now a strong 'transfer market' between forces and the frequency of officers transferring between forces has increased. To transfer between forces an officer resigns the 'office of Constable' from their former force and rejoins their new force in the 'office of Constable' (no matter what rank they transfer in).

Many officers fail to realise that their donation ceases when they leave their first force and doesn't automatically restart when they join their new force. In effect they have to authorise a new payroll giving voluntary donation to the Charity and if they fail to do so they then fall into becoming a non-donor.

This can not only occur when officers transfer within constituent forces of this Charity, but also when transferring from forces within The Police Rehabilitation Centre (Flint House) constituency area to constituent forces of this Charity.

However, when an officer becomes aware of their circumstance of being a non-donor to this Charity they may commence the payroll giving voluntary donation to this Charity and it may be suggested to them that they should consider a donation to the Charity in regard to the 'lost' donation period. Should such an officer seek treatment having been a non-donor then the provisions of the Non-Donor Policy will be considered with particular consideration of their previous voluntary donations to this Charity or to The Police Rehabilitation Centre (Flint House).

Maternity Leave:

A police officer on maternity Leave retains the 'office of Constable' and should ensure that their voluntary donation to support the Charity continues to be made whilst on <u>paid</u> Maternity Leave otherwise they then fall into becoming a non-donor. Officers on <u>unpaid</u>



Maternity Leave, who had been donors to the Charity prior to Maternity Leave, will be granted a 'donation break' until resuming duty or ceasing to hold the 'office of Constable'.

Career Breaks:

A police officer who takes a 'career break' retains the 'office of Constable' and should ensure that their weekly voluntary donation to support the Charity continues to be made whilst on their career break otherwise they then fall into becoming a non-donor.

30+ Scheme:

Upon attaining 30 years service police officers may have the opportunity to join the 30+ Scheme. In effect the officer retires from the service for a short period, sometimes a single day, and rejoins in 'the office of Constable'. The officer receives a lump sum pension commutation but is not in receipt of their police pension which is not paid until they finally retire from the police service.

In effect an officer on the 30+ Scheme is not a retired officer and is not in receipt of a police pension, the officer holds the 'office of Constable' and should ensure that whilst on the 30+ Scheme their payroll giving voluntary donation to support the Charity continues to be made otherwise they then fall into becoming a non-donor.

Suspended Officers:

There are many reasons why a police officer may be suspended from duty: during the course of an investigation, or awaiting charge, or awaiting the matter being dealt with by a Court; or other disposal process.

The frequency of police officers being suspended from duty is fortunately rare, however, during their suspension a suspended officer may seek treatment from the Charity either for a reason unconnected with their suspension, or as a direct result of their suspension e.g. suffering anxiety and the need for rest and recuperation.

Each case of a suspended officer applying for admission will be considered on the individual merits of the case taking into account the following factors:

- Where there may be a potential of harm or danger to the officer themselves, patients attending the Centres or to staff.
- Where concern or embarrassment may be caused to the officer themselves, patients attending the Centres or to staff because of the nature of the allegation made.

Special Constables:

The Board of Trustees are mindful of the fact that Special Constables, who do not presently make a voluntary donation to support the Charity, are citizens who volunteer to support their police force and their communities. Special Constables are appointed to 'the office of Constable' and where, normally, in the execution of their duty as a Constable an injury or illness arises then consideration may be given for their admission for treatment.

Trustees would wish that the Special Constable, or a third party e.g. their force or force benevolent fund arrangements, supports the Charity with a contribution of 'a donation' taking into account the average cost of a two week admission period for treatment or such a reasonable donation that in the circumstances may be agreed by the Charity.

Reciprocal Agreement with the Police Rehabilitation Centre (Flint House):

There may be infrequent occasions where an officer who serves, or a retired officer who did serve, in a Police Rehabilitation Centre (Flint House) police force would find it



more appropriate to their needs to attend the PTC rather than Flint House which is located in Oxfordshire.

Reasons for this may include that the individual now resides within the PTC catchment area; or there is good reason why the individual seeks treatment elsewhere than in the company of officers from their own force e.g. a work related issue or condition.

The PTC Trustees have agreed with The Police Rehabilitation Centre (Flint House) to operate a reciprocal admission policy where in 'significant and unique cases' a serving or retired officer **may** be approved for admission to the PTC. This depends on the individual meeting the general eligibility criteria (which is the same for The Police Rehabilitation Centre: Flint House) and is subject to availability and capacity issues (occupancy, treatment and financial).

The Police Rehabilitation Centre (Flint House) will consider applications for admission in respect of officers who serve, or retired officers who did serve, in a PTC police force and make their decisions on a similar basis.

The length of 'waiting lists' at either the PTC or the PRC (Flint House) does not normally constitute a significant or unique reason.

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Clinical Admission Criteria and Clinical Reporting Policy

Respo	nsible Manager:		Chief Executive	
Issue	Board of Trustees: Policy		Three years from date of issue, OR,	
date:	Approved:	Review:	where legislative or other issues	
	21 November 2008.		prompt an earlier review	
	Effective:			
	1 January 2009			
	Revised:			
	1 January 2011			
	1 January 2012			
	-			

Policy Statement:

This policy sets out the clinical admission assessment criteria and process which has been developed so that the Charity understands the circumstances and needs of the applicant for admission and can decide, organise and schedule appropriate treatment to support the applicant in a return to better health and wellbeing.

Purpose:

The purpose of this policy is:

- To provide a framework and process to assist clinical decision making in respect of an application for admission for treatment
- To provide a framework and process for the potential provision of clinical reports following treatment

Legal Safeguard:

The Treatment Centres at St Andrews and Castlebrae are not registered care homes with the meaning of the Care Standards Acts of England & Wales, Scotland and Northern Ireland. Consequently the Centres are not approved, nor capable of providing acute, long term or intermediate care.

All decisions on admission for treatment will always be based on the merits of each individual case and admission prioritised on the need for treatment.

Responsibility for application of the policy:

The responsibility for the application of the policy will be that of the Chief Executive.

An applicant for admission who believes that they have been unfairly treated under this policy, or their representative, should in the first instance raise the matter, normally in writing (including email), with the Chief Executive.

Should the matter not be resolved by the Chief Executive the applicant, or their representative, should bring the matter to the attention, normally in writing (including email), of the Chairman of the Board of Trustees without undue delay.



Policy:

There are a number of factors to take into account in developing a framework to assist in making decisions about admission decisions, including:

- Care Quality Commission and Care Standard Acts and their content,
- Criteria based upon the 'Activities of Daily Living' (ADL); (Roper, Logan & Tierney).
- Issues of nursing and personal care in relation to persons who are, or have been:
 - Suffering from an illness;
 - Experiencing mental health issues;
 - Disabled or infirm;
 - Dependent on alcohol and/or drugs.
- Acute and chronic circumstances:

Acute: normally no admission whilst the circumstance is fresh;

e.g. wait until the acute issue is under control

Sub acute: generally no problem in considering an application for

admission

o Chronic: normally no long term resolution to the condition, varying

degrees of success in rehabilitation/respite achieved

Clinical Criteria:

Individuals (see the PTC Eligibility Policy) who make application for admission and who are considered for physiotherapy, nursing treatment; or 'respite' treatment and support, as either a residential IN-patient or as an OUT-patient should:

- a) Normally be capable of independently undertaking the 'Activities of Daily Living' (ADL) including self-care and self-medication, however,
- b). Where the circumstances of the applicant for admission do not meet the criteria of a) above:
 - Each and every application will be sympathetically considered as a 'significant and unique' case on its own individual merits in relation to the level of support an individual may need with 'Activities of Daily Living (ADL), self-care and self-medication.
 - Account will be taken of the support that an individual could themselves marshal to assist their circumstances e.g. accompanied by a 'companion' e.g. spouse/partner, son/daughter; friend.

*NOTES:

- No decision made in respect of any 'significant and unique' case will breach the registration requirements of the relevant Care Standards Acts or Care Quality Commission Standards.
- Any decision in respect of a 'significant and unique case' will not form a precedent for that individual or any other application for admission.
- Where the applicant themselves is a 'carer' for a dependent child or dependent adult sympathetic consideration will be given to attendance in appropriate Centre accommodation whilst the applicant themselves receives treatment.
- Companions: A Companion's Application Form should be completed in such cases to accompany the individual's application for admission see 'Companions' on page 15).



Admission:

Overall principle:

The Charity's priority aim within the Sealed Schemes (governing documents) is that serving police officers receive priority for treatment. The Trustees have discretion, where capacity (occupancy, treatment and financial) allows, to consider applications from retired police officers who request admission for treatment.

The definitions of 'police officer' and 'retired police officer' are contained within the PTC Eligibility Policy (which is at the beginning of this User Guide).

General conditions:

All applications for treatment, or to be accompanied by a 'companion', must be submitted on the Charity's current application forms.

Applications for admission <u>must</u> be supported by evidence of a clinical need that can be addressed by the Charity's treatment.

Applications for a further admission should not normally be made until <u>at least 12 months has elapsed</u> since a previous admission period. **UNLESS**:

- The PTC clinical assessment at the conclusion of that previous admission recommends an earlier admission, **OR**,
- There is a significant change in the current condition/circumstances which merits an earlier admission, **OR**,
- A new circumstance or condition has arisen that would prompt the consideration of an earlier admission.

Where the PTC clinical assessment at the conclusion of a period of admission recommends no further clinical treatment is necessary for the same condition, particularly after several admissions, consideration may be given to:

- The clinical need for non-physio and respite treatment, **OR**,
- Not approving a further admission because no practical or long term benefit can be achieved through use of the Charity's scarce resources.

General conditions - Periods of admission:

The Charity's Treatment Centres are open for treatment throughout the year excluding the period in which Christmas and New Year fall. On all other Bank Holidays the Centres are open for admission and treatment.

Admission to the Centres for treatment will normally be for a one or two week duration although an extended period (normally of a further week) may be advised by a physiotherapist or nurse and will be considered taking all factors into account e.g. occupancy demand.

Provision for non-residential treatment as an OUT-patient may also be considered in appropriate circumstances e.g. proximity of home address, or temporary residence, and travel time to and from either Centre



General conditions - Serving officers:

The period of admission for a serving officer is normally of two weeks during which it is considered that the maximum benefit from treatment can be achieved. Admission will normally take place on a Monday; bedrooms may not be ready for occupation before 1200, however, treatment assessments may commence from 0930.

- Personal circumstances or duty requirements may mean that a one week admission for treatment is more beneficial than no admission at all. If so, this will normally be Monday to Friday only (four night's duration); however, consideration **may** be given to a Sunday admission with arrival after 1430.
- Where an assessment at the conclusion of a period of treatment recommends a
 further (and earlier than the elapse of 12 months) admission for treatment to
 optimise the benefits of treatment this further period will normally be Monday to
 Friday (four night's duration).
- A Sunday arrival prior to a period of admission will normally only be offered where an individual's 'significant and unique' personal or travel circumstances merit consideration of such.
- In any circumstance, patients must vacate their bedroom by 1030 on the day of departure (lunch may be provided on request before a later departure from the Centre itself).

General conditions – retired officers:

Dependent upon serving officer demand for admission, and subject to capacity (accommodation, treatment and financial), retired officers who apply for admission and who meet the clinical criteria will normally be offered a one week period of admission.

- The one week period of admission will normally be:
 - Sunday arrival not before 1430.
 - Sunday departure vacating the room by 1030 (lunch may be provided on request before a later departure from the Centre itself).
- Retired officers will be required to attend a nursing assessment on the Sunday of their arrival in order to avoid undue delay in their access to Monday treatment.
- Monday arrival and departure will only be considered where there are 'significant and unique' circumstances present and each case will be considered on its individual merits, e.g. where NARPO/RPOAS or force transport is being arranged.
- Where an assessment at the conclusion of a period of treatment recommends a further (and earlier than the elapse of 12 months) admission for treatment to optimise the benefits of treatment this further period will normally be Monday to Friday (four night's duration).

Cancellation and changes of admission date:

Following the allocation of an admission date there may be occasions where this date becomes unsuitable for a range of good reason e.g. required at court; duty requirements; NHS appointment for treatment/surgery.

During 2011 there was a significant increase in the number of cancellations of the allocated admission date. This caused problems in re-arranging and allocating an alternative admission date as well as the potential loss of treatment opportunities for other applicants.



Regrettably, not all notice of cancellations were forwarded to the PTC which sometimes meant that the first notice of a cancellation was when a patient failed to attend for admission on the allocated date. This then meant that there was an unexpected vacancy which, had notice of cancellation been received, could have been allocated to another applicant and may have meant an earlier admission for that individual.

Notification of cancellation:

Therefore, notwithstanding that they may have notified their in-force arrangements, the applicant themselves must notify the PTC in writing (an email will suffice).of any cancellation or requested change of admission date and also provide 'dates to avoid' within the following twelve weeks to help with re-arranging their admission date.

Timeliness of admission date:

When the admission date that the PTC can offer, whether first, second or third, admission date, is more than 12 weeks since the date of the original application further enquiries will normally be undertaken to assess the current clinical need to attend for treatment.

Those further enquiries may include the provision of advice about what other treatment or activity could be undertaken in the intervening period before any potential admission. The advice may also include referral to more local provision in appropriate cases e.g. force local provision; NWPBF - St Michael's/Mather Avenue; N Ireland – PRRT.

In some cases it may be necessary, because of the passage of time, to require a further application to be submitted with up to date information of the current clinical condition and treatment need.

Companions:

Having regard to the Clinical Criteria, referred to on page 13 in this User Guide, account will be taken of the support that a patient can themselves marshal where there is a need for support to them in the 'activities of daily living' whilst an IN-patient e.g. help in getting dressed or undressed.

Where this is the case the applicant must also submit a <u>Companions Application Form</u> providing sufficient information upon which to make a decision to allow a companion to also attend the Centre. This is particularly important where the 'companion' themselves may have clinical or special needs that should be taken account of e.g. accommodation, diet, etc.

All applicants requesting to be accompanied by a 'companion' will be contacted by one of the Charity's nurses to verify the need to be accompanied.

Cottages:

The cottages at each Centre may be available to assist in accommodating patients who have a family or personal circumstance where 'family' accommodation would support their ability to attend for treatment e.g. resident dependent/disabled member of the family:

- Admission will normally be for one week:
 - Monday to Sunday arrival not before 1430.
 - Sunday departure vacating the cottage by 1030.



Provision of Clinical Reports

There is no standard 'police fitness test' and it is therefore not possible for the Charity to make any clinical assessment against a standardised criteria to assess the level of fitness for duty of any individual police officer. This is the legal responsibility of the officer's employer.

Therefore the only clinical reports that can be provided by the Charity are in relation to the nature and assessment of the condition of the patient upon admission; treatment provision then accessed and undertaken; the outcomes of that treatment e.g. increased mobility.

At the conclusion of a programme of treatment a brief clinical report **may** be made available to the individual or, with their consent, to a third party.

Additional detailed clinical reports requested by an individual or, with their consent, a third party, may be subject to a charge for their provision in accord with standard costs agreed by professional or legal bodies e.g. BMA, Law Society, ACPO & ACPO(S). The report will be provided once payment has been received by the PTC.

The Charity's 2012 Business Plan contains an objective to complete engagement with a small number of 'pilot' forces to develop a system and process where, at the conclusion of a programme of treatment a simple standardised clinical report may be provided to the individual or, with their consent, to a third party. These simple discharge reports, which will take into account the format and process of the GP 'Fit Note', may assist identification of further treatment options or assist in workplace decision making upon the individual's return to force.

To ensure the effectiveness of the proposed clinical report processes the new report system and process is likely to be 'piloted' with a small number of forces during the first half of 2012 before being evaluated and consideration given to wider adoption.

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Summary of facilities

Both St Andrews and Castlebrae have excellent facilities to assist with an officer's treatment, recuperation and relaxation.

Bedrooms – The bedrooms are generally single en suite rooms but there are a small number of twin/double rooms for use in certain circumstances by a patient and their 'companion'. Please refer to the clinical admissions criteria on Page 13 for more information. Rooms are equipped with a television/DVD and also tea and coffee making facilities.

Cottages – In addition to the accommodation in the Centres there is a <u>self-catering</u> cottage in the grounds of St Andrews and two <u>self-catering</u> bungalows at Castlebrae. This accommodation is available to officers who need to attend with their family or 'companion'. Each case will be examined on its own merit and if approved will normally be for a one week stay. Children under 16 years are not normally permitted to use the Centres' facilities.

Treatment rooms – Both Centres have large physiotherapy departments, a nursing surgery and clinical room and a suite of complementary therapy rooms.

Patient Advisor - Each Centre also has a Patient Advisor position which provides for a 'listening ear and signpost' to force and local welfare and support facilities.

Exercise areas – The gyms at St Andrews and Castlebrae are rehabilitation gyms and so feature mostly cardiovascular equipment with some weight bearing apparatus and free weights (although the facility is a rehab gym rather than a 'body building' gym). In addition there are fitness rooms where the fitness and strength classes are held. Each Centre has a treatment and training pool.

Patient leisure facilities – In the pool area at each Centre there is a sauna/steam room. At St Andrews there is also an aromatherapy room and Castlebrae has a spa bath. There are a number of mountain bikes available as well as a putting green, tennis court and other outdoor activities. Indoor activities include snooker, pool and table tennis.

Communal areas – Sky television is available in the main lounges at St Andrews and Castlebrae and there are other 'quiet' lounges. Wi Fi internet access is available throughout each Centre and was installed in response to patient demand – a small charge is made for this service. At each Centre there is a library of books and DVDs some of which have been donated by patients. Hot drinks machines are available at no cost and vending machines holding a range of healthy options (and chocolate!) are also available.

Grounds – St Andrews and Castlebrae are set in acres of landscaped gardens complete with ponds and seating areas. Both Centres feature a memorial garden in recognition of the Charity's founder, Miss Catherine Gurney, OBE. At Castlebrae the memorial garden takes the form of a discrete sensory garden.



How to apply

Serving police officers who donate to the Charity, or retired police officers who contributed throughout their police service, who wish to apply for treatment at the Centres are required to complete an application form. (Full definitions of 'police officer' and 'retired police officer are contained within the PTC Eligibility Policy).

Application for Admission forms are no longer printed and distributed to forces in bulk. Instead application forms are available to download from the Police Treatment Centre website www.thepolicetreatmentcentres.org (formerly www.npch.org). Alternatively the form is available in PDF format for forces to upload to their own internal computer systems. Please ensure that the most up to date form is used and you can email enquiries@thepolicetreatmentcentres.org for a copy of the PDF file.

The application process is outlined below in general terms. (Please note there are some minor variations from force to force):

- The Application Form should be completed by the applicant and signed by a medical practitioner (Force Medical Officer, Occupational Health Nurse, Physiotherapist or GP).
- The Application Form is submitted to the Force Occupational Health department, or HR, or Police Federation office who should check it has been completed in full (a check list is provided).
- Where appropriate a Companions Application Form should also be submitted
- The Application Form should be sent to Admissions at The Police Treatment Centre, Harrogate, for processing.
- Serving officers are normally asked to submit two payslips, the most recent and one of which should be from at least six months previously (and no more than 12 months previously) to confirm their donations to the Charity.
- Retired officers will be asked to confirm on the Application Form the date they joined and retired from the police service.
- Clinical assessment of the application and information is undertaken at the Police Treatment Centres to verify and prioritise treatment need; and to try and ensure applicants are attending for treatment at the optimum time in their recovery process.
- The applicant will be allocated a date to attend for treatment via their force Occupational Health Unit or Police Federation representative, normally within ten working days of receipt by the PTC.
- Joining instructions and a patient information sheet (**Appendix A**) are then sent to the applicant.

By way of example specimen completed IN-patient; OUT-patient; and Companion Application forms are available in **Appendix B** to demonstrate the level of detail required to process an application as swiftly and effectively as possible. Often information is omitted from the form, such as a proper description of the condition requiring treatment, dietary needs, dates to avoid and so on, and this can delay the application process whilst further enquiries seeking clarification are made.

Officers can state a preference as to which Centre, they would wish to attend but should be aware the final decision of which Centre will be allocated will be based on the nature of the treatment required and the optimum attendance time. A further preference of 'Either Centre' is also provided which assists with allocating an earlier admission if the waiting list is longer at one Centre than at the other Centre.

Centre/Charity rules

Many officers staying at the Police Treatment Centre require rest and recuperation so while the aim is to have a relaxed atmosphere, there are a few necessary rules and the cooperation of all patients is sought in abiding by these rules:

- There is no consumption of alcohol permitted at the Centres.
- Smoking is not allowed anywhere inside the buildings.
- Patients and visitors should sign in and out when entering and leaving the premises.
- No visitors are permitted in the building after 2300.
- Patients are asked to return to the Centres by midnight so as not to disturb other patients and to also ensure they are fit and ready to participate in planned treatment and activities the following day.

On arrival at the Centres

- Patients are asked to arrive at the Centres at the time specified in their joining instructions because this greatly assists with the admission process. There is sufficient free parking at both Centres.
- After being received at reception the patient is shown to his/her room and a tour
 of the Centre is available at set times.
- Every patient sees the nurse for an induction assessment on arrival prior to any further physio assessment and starting their treatment programme.
- At 1700 every Monday a short welcome talk is held to give new patients an overview of their stay and provide an opportunity for any queries to be answered.

On departure from the Centres

- The Charity is working towards developing a simple 'discharge report' for issue to officers who may then share that discharge report with their force Occupational Health arrangements, or GP, if they so wish.
- Where forces or other parties e.g. Police Federation, request written reports
 these will be made available to forces only if the patient consents to this in
 writing and a charge to the force or requester is likely to be made for doing so.
- In the case of requests for medical reports from legal advisors or insurance companies these will only be released if authorised by the patient, and a charge will be made in line with ACPO, BMA or Law Society rates <u>before</u> such reports are released.
- Where a serving or retired officer is receiving treatment as a result of an event where there is a claim for personal injury compensation being pursued then the Charity will ask the officer to authorise the Charity being 'enjoined' with their claim so as to recover the cost of their treatment received at the Charity. This is a normal legal process and supports meeting the Charity's annual expenditure. There is no cost to the officer in such a process and the Charity will liaise and work with the officer's legal advisors to achieve a mutually satisfactory outcome.
- Before each patient leaves they are asked to complete a feedback form. The
 results of patient feedback are important in helping to shape the facilities and
 services provided at the Police Treatment Centres.



Treatment - Nursing

The nursing departments are staffed by experienced nurses who see every patient on arrival at the Centres to undertake a short induction clinical assessment.

The main aim of the nursing staff is to promote the benefits of a healthy lifestyle and to encourage patients to take a more proactive approach in managing their health. As well as offering well-person checks, advice and information sessions are provided on a number of topics such as sleep problems, men's and women's health, alcohol awareness, and recognising and dealing with the symptoms of stress. Relaxation classes provide a welcome opportunity to de—stress.

As officers generally spend a maximum of twelve days at a time at the Centres formal counselling is not offered. However, the Charity's Patient Support Advisors are able to provide a confidential listening ear and act as a 'signpost' to help officers identify additional support services in their force or home environments.

As part of a holistic approach to treatment and care, an ever-increasing range of complementary therapies, delivered by qualified therapists, is offered at the Police Treatment Centres. Therapies are extremely popular and while provision has been made for additional appointments, it is important to note that provision is limited and all appointments are allocated by the nursing staff based on the needs of the individual patient with priority normally being given to non-physio patients.

No complementary therapy sessions will normally be offered to out-patients, non-residents or 'companions' accompanying in-patients. The availability of complementary therapy sessions will always be dependent upon the availability of trained staff.

Should any appointments remain unallocated these may be offered to all patients who wish to book a treatment on a first come first served basis. A contribution of at least £15 towards the cost of these treatments is requested.

The Police Treatment Centres are not registered nursing homes and as such, patients who are admitted must be able to care for themselves. However, officers requiring a degree of assistance from a 'companion' e.g. spouse/partner; son/daughter can attend the Centres under certain circumstances. If there is any doubt these matters can be discussed with the Charity's clinical staff prior to submitting an application for admission.

Treatment – Physiotherapy (IN-patient)

The majority of officers attending the Police Treatment Centres do so to receive intensive physiotherapy treatment.

Following the nursing induction on their day of arrival each physio patient is thoroughly assessed, relevant to their condition, by a physiotherapist to enable a tailored individual treatment programme to be developed. This normally involves measurement of joint range of movement, muscle strength and pain levels so that suitable goals of treatment can be set. Treatment can include:

- Hands-on manipulation and mobilisation
- Electrotherapy, such as ultrasound
- Heat and ice treatment
- Acupuncture
- Individual active and passive exercise
- Class activity and exercise
- Postural education

The physiotherapists take a proactive approach to treatment but the emphasis is on helping patients to help themselves; patients are encouraged to participate in education and exercise classes and make good use of the facilities, including the swimming pool and exercise gym. Such work is carefully guided and can be checked daily if necessary.

Education is an important part of the work of our physiotherapists, who aim to promote self-management and a better understanding of anatomy, pain management, injury prevention and maintenance of good health.

Through a continuous professional development scheme all of the physiotherapists at the Police Treatment Centres keep up-to-date with current clinical evidence and new treatments.

Treatment – Physiotherapy (OUT-patient)

The Charity offers an outpatient service and will normally only see patients who live, or temporarily reside, within one hour's drive time of each Police Treatment Centre. This is because longer travel time and journeys are likely to negate any beneficial effect of physiotherapy treatment (depending upon the nature of the condition to be treated). Treatment decisions will be made based on individual circumstances.

Outpatient services are intended to be short term interventions and the service is not provided on a long term basis with regular visits over a long period of time. For ongoing long term treatment following a PTC outpatient intervention the officer should liaise with their force Occupational Health Dept, their own GP, or make other private arrangements.

If there is any doubt matters can be discussed with the Charity's clinical staff prior to submitting an application for treatment.

We offer a telephone advisory service to give officers access to information on whether physio treatment is needed and if so, how to access it. Officers should call and ask for the Physio Department:

St Andrews Tel: 01423 504448 Fax: 01423 527543 Castlebrae Tel: 01764 664369 Fax: 01764 664598



All potential outpatients should contact their Occupational Health, Welfare or HR Dept who should send a fax with the completed Out-patient Application Form to the appropriate Centre. This helps us to: verify if a patient has been contributing to the Charity; prevent queue-jumping; ensure that the force Occupational Health or Welfare Dept are aware of the case and ensure all personal and medical information remains strictly confidential.

Application Forms should be completed clearly with accurate contact numbers so that, if necessary, further enquiries can be progressed swiftly. We try to keep outpatient waiting times to a maximum of one week; incorrectly completed or unclear application forms may delay treatment and can cause problems when we try to contact a patient.

Serving officers and inpatients will always be our priority as they have been released by their force to receive intensive treatment. We get a lot of queries from retired officers but refer them to Occupational Health or Welfare departments as they still need to get the appropriate Outpatient Application Form signed.

Sometimes advice can be given over the phone. In other cases we may offer a one-off advisory visit and may then sometimes suggest that the applicant applies to be admitted as an inpatient because their condition requires intensive treatment.

We have information on assistance with childcare (and other dependency issues) which may help some applicants for whom a residential stay could prove difficult (see page 24).

Provision of Clinical Reports:

There is no standard 'police fitness test' and it is therefore not possible for the Charity to make any clinical assessment against a standardised criteria to assess the level of fitness for duty of any individual police officer. This is the legal responsibility of the officer's employer.

Therefore the only clinical reports that can be provided by the Charity are in relation to the nature and assessment of the condition of the patient upon admission; treatment provision then accessed and undertaken; the outcomes of that treatment e.g. increased mobility.

At the conclusion of a programme of treatment a brief clinical report **may** be made available to the individual or, with their consent, to a third party.

Additional detailed clinical reports requested by an individual or, with their consent, a third party, may be subject to a charge for their provision in accord with standard costs agreed by professional or legal bodies e.g. BMA, Law Society, ACPO & ACPO(S). The report will be provided once payment has been received by the PTC.

The Charity's 2012 Business Plan contains an objective to complete engagement with a small number of 'pilot' forces to develop a system and process where, at the conclusion of a programme of treatment, a simple standardised clinical report may be provided to the individual or, with their consent, to a third party. These simple discharge reports, which take into account the format and process of the GP 'Fit Note', may assist identification of further treatment options or assist in workplace decision making upon the individual's return to force.



To ensure the effectiveness of the proposed clinical report processes the new report system and process is likely to be 'piloted' with a small number of forces during the first half of 2012 before being evaluated and consideration given to wider adoption.

Assistance with childcare

For some officers, childcare issues may make it difficult to attend the Police Treatment Centres to receive treatment.

If this is the case, officers should be aware that both of our Centres have <u>self-catering</u> cottages available for use by families. Officers with young children can apply to stay in one of the cottages and can bring a partner, family member or friend with them to care for the children while they receive treatment.

Admission will normally be for one week:

- Sunday to Monday arrival not before 1430.
- Sunday departure vacating the cottage by 1030.

For officers who simply have no-one they can call upon to assist in this way there is an alternative available at St Andrews in Harrogate. Again the officer can apply to stay in the cottage with their children but during treatment sessions, a place can be arranged for the youngsters to attend a local Kindercare Nursery. The cost of this placement will be borne by the officer.

The nursery is located in Cornwall Road, Harrogate, and a short walk away from the Police Treatment Centre. The nursery has undergone extensive refurbishment and cares for children aged 12 weeks to five years from Monday to Friday. Qualified staff and nursery assistants care for the children and the nursery is supervised by a full qualified and experienced Early Years Practitioner, with close involvement of a nursery co-ordinator.*

Officers are welcome to contact the nursery for more information or to arrange a visit. The telephone number for Kindercare is 01423 560875.

The Charity accepts no responsibility or liability for any service provided as a result of an arrangement between the officer and Kindercare.

Cottages:

The cottages at each Centre are provided to assist in accommodating patients who have a family or personal circumstance where 'family' accommodation would support their ability to attend for treatment e.g. resident dependent/disabled member of the family:

* Information from the current Kindercare prospectus.

Assistance with dependent adults

Officers may also, in some circumstances, have responsibility for their adult children or aged relatives.

Should these responsibilities present a barrier to making an application for admission a discussion with an appropriate member of Charity staff may enable solutions to be explored.



Frequently Asked Questions

Eligibility

Q1. I don't donate to the Charity but I really need treatment. Can you help me? Treatment at the Centres is only provided free of charge to donating officers. For more information please refer to our Eligibility Policy on page 6.

Q2. How often can an officer attend for treatment?

Applications for further admission should not normally be made until <u>at least 12</u> <u>months has elapsed</u> since a previous admission period. For full details please see our Clinical Admission policy on page 12.

Q4. I have retired from the force but have now returned on the 30-plus scheme. Am I eligible to attend?

Retired police officers become eligible for admission to the Centre when they are in receipt of a full police pension. The Trustees of the Police Treatment Centres have agreed that officers who have opted for the 30-plus scheme remain serving police officers holding 'the office of Constable' and must continue to regularly donate to the Charity to retain eligibility for free treatment.

Admission and Treatment Periods

Q5. What is the usual treatment period for serving officers?

Serving officers would generally stay for two weeks. Personal circumstances or duty requirements may mean that a one week admission is more beneficial than no admission at all. If so, this will normally be Monday to Friday only (four nights duration), however - consideration **may** be given to a Sunday admission with arrival after 1430.

Q6. What is the usual treatment period for retired officers?

The Charity's Sealed Scheme (governing document) states that priory will be given to serving officers who are seeking treatment and if capacity and demand allow retired officers may be able to attend. Retired officers will generally be offered a one-week stay.

Q7. I last attended for treatment about 8 months ago. Can I apply for a further period of treatment?

Applications for a further admission should not normally be made until <u>at least 12 months</u> has elapsed since a previous admission period. Exceptions to this rule are:

- If PTC clinical assessment at the conclusion of that previous admission recommends an earlier admission; or
- If there is a significant change in the current condition/circumstances which merits an earlier admission; or
- A new circumstance or condition has arisen that would prompt the consideration of an earlier admission.

Clear medical evidence of such a change in circumstance must be provided.

Q8. I have childcare issues. Can I be booked in to attend the Centre daily but go home each night?

To get the maximum benefit from the treatment programmes officers would generally be expected to stay at the Centres for the duration of their treatment.

There are cottages available for use by families at each Centre and these are available for periods normally of one week. At St Andrews we have an arrangement with a local nursery to provide childcare (see page 22).

In some circumstances provision for non-residential treatment as an OUTpatient may also be considered so as to help with these matters, this will depend upon the proximity of your home address, or temporary residence, and travel time to and from treatment (see page 22).

Every application for admission as an OUT-patient will be considered on its individual and clinical merits.

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Q9. I recently applied for treatment but was turned down on this occasion. Why was that?

Individual circumstances will vary but the decision may have been reached because no practical or long term benefit can be achieved in your injury or illness through use of the Charity's scarce resources (see page 13 regarding chronic conditions).

Seeking Treatment

Q10. Can I only attend if I have been hurt on duty?

Treatment is available regardless of how injury/illness was sustained.

Q11. Do you only treat the most serious injuries?

We can treat a large range of injuries. In the case of less serious conditions we often find officers attending for physio do so quite late on in their recovery whereas in fact an early intervention can often bring about far more significant results. If your condition is affecting your ability to perform the activities of daily living or your job to the full then you should consider applying for treatment.

Q12. I'm due to have an operation shortly. When is the best time to attend for treatment?

This will vary according to the exact nature of the surgery, i.e. after joint replacement it is best to wait until your stitches are removed and the wound is healed at around three weeks, but after ACL reconstruction a six-week post-operative period is recommended to allow for the knee joint to settle down. Please contact the physiotherapy department if you require further guidance.

Q13. Can I express a preference for which Centre to attend?

The application form allows you to express a preference to attend Castlebrae; St Andrews; or 'Either'. However, allocation will depend upon a number of factors for example: capacity at each Centre; and the urgency for treatment.

By preferencing 'Either' you may be allocated admission for treatment sooner that if you expressed a preference solely for a specific Centre.

Sympathetic consideration will be given to an expressed preference and where possible we will meet the request.



Q14. How long is the waiting list?

Waiting time for admission can depend on how quickly your force forwards your application to us and will also vary according to demand through the year. However we assess each application individually and will prioritise urgent cases wherever possible. Normally admission is within two to six weeks depending upon the circumstances (see Q.13 regarding expressing a preference).

Q15. How long can I expect to wait before I am allocated a date to attend?

You can normally expect to hear from us within ten working days from the time that we receive your application. The time it takes to allocate a date for treatment will depend on the quality and detail of information on the application form which enables our staff to make a clinical assessment of the individual's needs.

If insufficient information is provided then further information may have to be sought from you and this could delay an admission decision.

Q16. I was asked to provide two payslips with my application form. Why was this?

Treatment is only provided free-of-charge to those officers who support the Charity by making a payroll giving donation. To ensure this policy is applied fairly and consistently we ask for proof that an officer makes this donation when processing their application form.

Q17. I have a query about my booking, who should I contact?

Initially we would advise that you check the Charity's website (www.thepolicetreatmentcentres.org) to find the answer to your query.

The admission process is administered from St Andrews, Harrogate, so if the website information does not answer your query please email us at enquiries@thepolicetreatmentcentres.org, or call 01423 504448 for assistance.

At the Centres

Q18. Having read my confirmation letter I have been asked to attend between certain times on my first day. Why is that?

Patients attending for physio are normally asked to arrive in the morning to enable them to have sufficient time to see their physio. Non-physio patients are asked to attend in the afternoon. While treatment may commence from 0930, please note that bedrooms may not be ready for occupation before 1200.

Q19. Can I arrive on a Sunday?

A Sunday arrival prior to a period of admission will only be offered to a serving officer where their 'significant and unique' personal or travel circumstances merit consideration of such.

We normally admit retired officers for a week commencing on a Sunday (after 1430). Retired officers are asked to depart their room by 1030 on the following Sunday, although lunch may be provided on request before a later departure from the Centre. This arrangement allows retired officers to receive maximum benefit and may also help with their travel and support arrangements.

Q20. The confirmation letter tells me to bring my 'Surgeons' protocol with me. What is that?

In short, after certain operations a surgeon may stipulate the aftercare that he/she would like the patient to have. This only occurs after some operations and not all surgeons set such a protocol. So if you haven't got such a document, the chances are you don't need one.

Q21. Can I attend as an outpatient with a non-physic condition?

There are some cases where this may be appropriate. After a consultation with nursing staff a treatment programme will be arranged, normally consisting of a weekly appointment for a six-week period.

Q22. I'm due to attend next week but I'm not feeling well. What should I do?

We want to ensure patients are well enough to participate fully in the activities available so the best advice is to call and speak to the duty nurse about your symptoms. It may be possible to delay your arrival or re-book. In the case of diarrhoea and sickness it is important patients have been symptom free for 48 hours before attending to prevent the potential spread of such conditions.

Q23. What do I need to bring with me?

With your joining instructions you will receive a patient information sheet outlining what is provided at the Centre (i.e. towels) and what is not (for instance, hairdryers).

Q24. Can my partner/driver stay for lunch/overnight when they drop me off?

Demand on the Centres means it is not possible to cater for visitors but they are welcome to enjoy a hot or cold drink in one of our lounges on arrival and before they set off on their journey.

Partners and carers can only stay at the Centres under certain specific circumstances and with prior agreement i.e. as a 'companion' when providing hands-on support for a patient.

Q25. I'm staying in one of the cottages. Are linens and towels provided?

All bed linen, towels and tea towels are provided, as are washing facilities. A starter pack with tea bags, milk, bread etc is also provided.

Q26. What is the dress code at the Centres?

The dress code is casual/sportswear in line with the activities officers undertake during their stay. Warm clothing to wear between exercise activities is advisable, especially in colder weather.

Q27. I have special dietary requirements. Can they be catered for?

Whether you have an allergy or intolerance, are trying to lose weight, or simply don't like certain foods, our catering team can help. You can ask to speak to a chef before your stay or on your first day and they will be happy to work out a suitable menu for you. Half portions and healthier options are also available.

The application form allows you to state any allergies; intolerances or special needs.

Q28. What is there to do on an evening?

As well as the leisure facilities that are available, each week patients organise themselves into a social and fundraising committee and hold events such as quiz nights. Not only are these a good way of getting to know one another they also help to raise a significant amount of money to support the Charity.

There are a number of television lounges and wifi access is available (for a small charge). For those seeking quiet time without televisions there are is a library and other quiet areas.

On departing from the Centres

Q29. My physio/nurse has recommended I return for a further period of treatment. How long will I return for?

Individual circumstances will vary but we would generally ask you to return for a further five days of treatment (four nights, Monday to Thursday inclusive).

Q30. What happens to the patient feedback you ask for?

The feedback is assessed on a monthly, quarterly and annual basis. The recent and future improvements, to facilities include matters raised in patient feedback. Sometimes it is possible to implement suggested changes and sometimes, for variety of reasons, it is not.

Information on ideas that have been adopted is displayed on the patient's noticeboards, as are a suggestion we have been unable to take forward along with the reasons why that is so.

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Appendices

Appendix A Patient Information sheet

Appendix B Example Inpatient application for admission

Appendix C Example Outpatient application for admission

Appendix D Example Companions Application Form

(The <u>applicant</u> requires support)

Appendix E Example Companions Application Form

(The <u>companion</u> requires support)



Feedback

At the end of your stay with us we ask you to fill in a Patient Feedback Form. It is important to us to learn what you thought of the services we offer and ways we might improve. Feedback received recently includes:

Due to my previous attendance at the centre a problem was highlighted about my right hand. If I had not attended I would have lost the use of my hand. (TC, Merseyside)

The treatment and facilities were first class. I was totally happy with everything. (PP, Lincs)

Every aspect I could not think of one thing that had, in any way, any flaw! (MD, Notts)

I was able to relax and de-stress to help with my recovery after a serious incident. The complementary therapies have greatly helped my healing process and I would like to thank all the staff. (HL, PSNI)

The food was excellent. The social events were good. Facilities were good. (ED, Strathclyde)

Very friendly helpful staff. Physio very good. All aspects of treatment put together to complement and aid recovery i.e. physio, exercise, PE classes. Excellent meals and choices. (DV, PSNI)

From walking into reception I was pleased by the care and attention given to me by all staff and all treatment. (SY, Strathclyde)

Excellent food, gym facilities good. Physio excellent. (G.M. D&G)

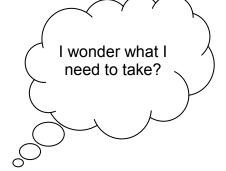
Friendly helpful staff. Professional treatment. Excellent facility. (P.N. Lancs)

Your feedback enables us to constantly improve and update the services we offer. Feedback forms are available from reception.

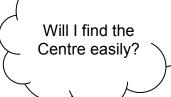


Information for Patients





Castlebrae, Castleton Road, Auchterarder, Perthshire, PH3 1AG





St Andrews, Harlow Moor Road, Harrogate, North Yorkshire, HG2 0AD





PTC is the working title of The Northern Police Convalescent and Treatment Centre Charity Commission No: 220956 OSCR No: SC039749

Introduction

We are looking forward to meeting you at the Treatment Centre and hope this information will prove helpful prior to your arrival. If you have a query about your stay please contact us or visit our website where you will find a section on 'Frequently Asked Questions', and also a PDF copy of our user guide (located under 'Our Services')

Castlebrae 01764 664369 St Andrews 01423 504448

Website www.thepolicetreatmentcentres.org

Directions

Couldn't be simpler: visit our website and follow the links from the homepage (Our Services/Travel to Centres). Additional transport information, including telephone numbers for local taxi firms, can also be found in this area of the website. If you are using a sat nav, the postcodes for each Centre can be found on the cover of this booklet.

On arrival

You will be greeted at reception and given useful information about your stay. Tours of the building take place during the day so if you haven't been to the Centre before, this may be of interest.

If you are staying for two weeks you can remain at the centre during the middle weekend, or you can leave your belongings in your room. Please inform reception of your decision.

What we provide

- En-suite facilities
- Flat screen TV and DVD player in bedrooms
- Tea and coffee facilities in bedrooms
- All towels (bedroom, gym and pool)
- Hot drinks and water dispensers in communal areas
- Laundry facilities including washing powder
- Breakfast, lunch and dinner (special diets catered for)
- In addition to extensive treatment facilities we have leisure facilities including mountain bikes, tennis, putting etc

What you need to bring

Our centres have a relaxed atmosphere and there is no need to dress formally. Most people choose to wear casual sports clothing in line with the activities available:

- Tracksuit/shorts/comfortable clothing
- Trainers
- Warm clothing for after physio session, during cold weather and other activities
- Swimwear
- Hairdryer
- Any medication you may be taking

Other useful information

Each week patients organise a social and fundraising committee. As well as being a great way for everyone to get to know each other, the evening activities that are organised (such as quizzes, raffles, bingo etc) importantly raise money to support the Charity's running costs. Last year approximately £50,000 was raised by these activities.

If you are interested in helping out, please make yourself known to the current committee members - our nursing staff will help you identify them. A social and fundraising committee 'Guide to Getting Started' is also available.



In the TV lounge there is Sky Television and a DVD player. There is a library and DVD library; any unwanted good condition books and DVDs are gratefully received!

You can access the internet on one of our dedicated patients' computers and there is wireless internet access available throughout the building for a small charge (£5 per week).

And finally...

If you are unwell prior to your stay, please contact our nursing staff in advance of your arrival at the Centres. In the case of sickness or an upset stomach, it is very important that you are symptom-free for 48 hours before attending for treatment. If you are unable to attend due to illness, your visit will be rescheduled as soon as possible.



The Police Treatment Centres

Application for Admission - INPATIENT

PART 1 - To be completed by the applicant (Please print in BLACK ink):

Surname:	ırname: Forenames:		Office	e Use Only
CONSTABLE	ALE	XANDER	Date	
(Preferred Name: ALEX)	received Donation	
11001	f nama an marriag	0):	check	
Any previous names: (e.g. change of Surname:	Forenames		Date entered	
Surname.	rolellallies	•	on system	
	economic and		Date @	
			Nurse	
Date of birth:	Gender (pleas		Date @	
23 4 78		(M)/ F	Physio	
Current police force, or if retired,	previous force	e:	1 st allocated	
NORTHUM	UBRIA		2 nd allocated	
Date joined: 01/10/96	210000	001234		
Date joined:	Collar Number:	00.23.1	3 rd allocated	
Date retired:	Police Pension	No:		
Address:		Contact details:		
		The second secon	0101 77	1. 6/78
23 VICTORIA ST		Home telephone:		
MORPETH		Mobile telephone:	7968 I	25 456
		Other telephone (state)		
		Email 1: 94@10	rthumbria	a.pnn.police.ul
Post Code: 1004 275		Email 2: .0.4.005V.0	able @ ac	mas-le
Next of Kin - Name & relationship):	Next of Kin - Contac	t Details:	
SUSAN CONSTA	BLE	07968	456 79	89
- 1 11 00				
- WIFE				
				/
Admission Preference: (please tick):	St Andrews, H	larrogate 🗆: Castleb	rae, Auchterarde	er □: EITHER □:
NOTE: By selecting EITHER you may recei				
Any specific accommodation req	uirements: (e.g	g. more than 6 feet tall; Hea	ring impaired – re fi	re alarms; Weight etc):
6'5 TALL				
		Colores of the second second second		
Any special dietary requirements	: (e.g. allergies or	intolerances):	117.67	
VEGETARIAN	+ LAC	TOSE INTOL	ERANT	
Dates to Avoid: (please include all leav	ve/holiday, Court, o	or other known commitment	s for the next twelve	e weeks):
ANNUAL LEAVE	1-4 INAC	Devenintende	ot the Contra	or the weeks and?
Can you attend at short notice?	/ NO	Do you intend to stay		/
(e.g. one week's' notice) (YES)	NU	(If more than one week a	umission; or retired	officer) YES / NO

Legal Claims: Have you any legal claims pending, or contemplated (current treatment circumstances):

YES (NO

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At work	On recuperative/ Trestricted duties	On sick leave	Other (specify)
Describe how	your condition happen	ed: (e.g. accident/event at wo	ork/post-operative/long-term illness):
			RTA ON DUTY 01/12/10
		161917	D MOVENENT IN T ARM.
chiropractor):	DAW MY G.P.	WHO REFER	
s your condi	tion improving/getting v	vorse/staying the same/o	ther? (please describe):
MINIM	MAL IMPROJE JC DAY - N	MENT SO FAI NUCH WORSE	2. CONSTANT PAIN AT NIGHT
What henefit	do you hope to gain fro	m your admission to a Tr	eatment Centre?:
LEARN	SOME EXER	CISES TO IM	PROVE PAIR +
Move	EMENT. WAR	UT TO RETURN	TO PULL DUTIES
If YES , was it	with the same or similar o	condition / a different condi	tion to be the one you have now? :
If the same co			tion to be the one you have now? :
If the same coimprovement): If necessary: Please complete	Companion (spouse/pate the 'Application to be Acc	come? (e.g. Worse / no change	
If the same co	Companion (spouse/pate the 'Application to be Acc	come? (e.g. Worse / no change artner etc.): ompanied by a Companion' fo	e / short term improvement / long term
If the same comprovement): If necessary: Please completions Companions	Companion (spouse/pate the 'Application to be Acc Full Name:	come? (e.g. Worse / no change artner etc.): ompanied by a Companion' fo ation which you supply to us	e / short term improvement / long term orm and attached that to this application. may be used in a number of different ways, for
If the same comprovement): If necessary: Please complete Companions Personal Information in the staff of	Companion (spouse/pate the 'Application to be Acc Full Name: Cormation: Personal informake admission and clinical designation to be accessed to the cormation of the cormation	come? (e.g. Worse / no change artner etc.): ompanied by a Companion' for audit and statistic mation on this form will be con	e / short term improvement / long term orm and attached that to this application. may be used in a number of different ways, for fraud prevention.
If the same comprovement: If necessary: Please complete Companions Personal Information I under staff of unless I agree resulting provisi	Companion (spouse/pate the 'Application to be Acc Full Name: Cormation: Personal information and clinical of the PTC and no personal information are personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and the property of the PTC and no personal information and the property of the pro	artner etc.): ompanied by a Companion' for ation which you supply to us decisions; for audit and statistic mation on this form will be conformation or clinical reports or r damages pursued by me as as may be specified by The	may be used in a number of different ways, for fraud prevention. Infidential to the professional and administrative will be shared without my express consent gainst the third party in respect of the accide a Police Treatment Centres as the costs of in
If the same comprovement): If necessary: Please complete Companions Personal Inferexample: To m I under staff of unless I agree resulting provision In order	Companion (spouse/pate the 'Application to be Acc Full Name: Cormation: Personal information and clinical of the PTC and no personal information are personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and clinical of the PTC and no personal information and the property of the PTC and no personal information and the property of the pro	artner etc.): ompanied by a Companion' for ation which you supply to us decisions; for audit and statist mation on this form will be con information or clinical reports or r damages pursued by me ar as may be specified by The	e / short term improvement / long term form and attached that to this application. may be used in a number of different ways, for ical analysis; for fraud prevention. Infidential to the professional and administrative
If the same comprovement): If necessary: Please complet Companions Personal Information I under staff of unless I agree resulting provisi In ordicinated I have	Companion (spouse/pate the 'Application to be Acc Full Name: ormation: Personal information and clinical of the PTC and no personal information are to include in any claim forms in my injury such sums on of my treatment er to provide the best positing me using the details I have	artner etc.): ompanied by a Companion' for ation which you supply to us decisions; for audit and statistic mation on this form will be conformation or clinical reports or or damages pursued by me as as may be specified by The sible levels of service, upday	may be used in a number of different ways, for analysis; for fraud prevention. Infidential to the professional and administrative will be shared without my express consent gainst the third party in respect of the accide a Police Treatment Centres as the costs of in

PART 3 - <u>HIGHLY CONFIDENTIAL</u> - to be completed by: Force Medical Officer <u>or</u> Occupational Health Nurse <u>or</u> Physiotherapist <u>or</u> G.P.

Diagnosis:		Date of Di	agnosis:
DECOMPRESSION R	L. SHOUL	DER	03/12/10
RESTRICTED MOVEN	NENT		
Duration of symptoms:			
TWO WEEKS			
Underlying conditions/relevant medical histo	ory:		
144PERTENSION			
			,
Ongoing investigation/treatment:			
PHYSIOTHERAPY SESSIO	ons we	EKLY	SINCE 21/12/10
physiotherapists during your admission e.g. ACL rehab definjury; other rehab guidelines);	tali, weight bearing t	uetais in the cas	e or rower limb tracture, shoulder
Stress/psychological/psychiatric issue?	YES 🗆	NO ☑	If YES please complete PART 4
Limited Mobility?	YES□	NO 🗹	If YES please complete PART 4
Is Nursing assistance required with the 'Activities of Daily Living'?	YES□	NO ☑	If YES please complete PART 4
Does companion need to attend?	YES 🗆	NO 🗹	If YES please complete PART 4
Medication/Infections/Allergies?	YES 🖫	NO □	If YES please complete PART 4
Is physiotherapy required?	YES 🗹	NO 🗆	If YES please complete PART 4
PART 4 - Stress/psychological/etc: Please state fully any treatment or risk factors (i.e. prare NO psychiatric or counselling facilities at either Counselling facili			
Is the applicant receiving, or has the applicant p			
υ (A			

Revised: January 2012

Support: please expand on the nature of support required by the applicant:
NIA
Medication/allergies/infections:
LACTOSE INTOLERANT - NO DAIRY FOOD.
The second secon
Mobility and Access: Can the applicant climb stairs / walk unaided? Please give distance. Is the applicant a wheelchair user? Full / partial or non-weight bearing? Expand fully on assistance level if needed on a daily basis and especially if at risk from falling:
NIA
PART 5 - Signature of: Force Medical Officer <u>or</u> Occupational Health Nurse <u>or</u> Physiotherapist <u>or</u> GP.
Certified by (signature): Print name: SSTANCEY Date: 1111
Address: THE SURGERY, LIME STREET, MORPETH
Post Code: MOI 300
Tel No: 0191 420 2020 Email: Surgery @ docMail.com
PART 6 - To be completed by Force representative / Police Federation Office: The applicant is (or was, in the case of a retired officer) a regular donor to The Police Treatment Centres.
<u>Please note:</u> Treatment will not be provided free of charge if the applicant does not, or if retired did not, make the payroll giving donation to support the Charity. If you are unable to verify the applicant is (or was, in the case of a retired officer) a regular donor to the Charity, the applicant <u>MUST</u> provide two payslips, including the most recent and the other at least six months earlier, to the physiotherapy department otherwise treatment will not commence.
Certified by (signature): SOMO Print name: 5 GREAUES Date: 16/1/11
Job Title: ADMIN OFFICER Department: FEDERATION OFFICE
Tel No: 0191 644 3219 Email: 39@ northumbra prin-police uk
Tel No: 0191 644 3219 Email: 39 @ NOTHWHOOD PRIN POLICE UK Any other relevant information: OFFICER DUE ON DRIVING COURSE
Tel No: 0191 644 3219 Email: 39@ NOTHWHOOD PRINDER UK Any other relevant information: OFFICER DUE ON DRIVING COURSE IN 10 WEEKS - EARLY TREATMENT WOULD ASSIST

Once all parts have been completed, please post this application form to:

Admissions

The Police Treatment Centres St Andrews Harlow Moor Road Harrogate North Yorkshire HG2 0AD

Contact details:

Tel: 01423 504448 Fax: 01423 527543

Email: enquiries@thepolicetreatmentcentres.org
Web: www.thepolicetreatmentcentres.org

Revised: January 2012



The Police Treatment Centres Application for Admission - <u>OUTPATIENT</u>

Please complete in BLACK ink.

Completed form should be	FAXED to the physiotherapy	department: (Delete one)
--------------------------	----------------------------	--------------------------

Castlebrae, Auchterader

Tel:

01764 664369

Fax:

01764 664598

St Andrews, Harrogate

Tel:

01423 504448

Fax:

01423 527543

PART 1 - To be completed by the applicant (please print)

Surname:	Forenames:		Office Use Only								
CONSTABLE			Date								
(Preferred Name: AUSON)			received Donation								
Any previous names: (e.g. change of n			check								
Surname:	Foren		Date entered								
			on system								
TAYLOR			Date @								
			Nurse								
Date of birth: 07/04/65	Gender (please	e circle):	Date @								
Current police force, or if retired, pro	ovieus force:	IVI /(F)	Physio 1 st allocated								
			1 allocated								
NORTH (10RKSH	IRE	2 nd allocated								
Date joined: 01 / 07 78	Collar Number	06543	3 rd allocated								
Date joined	Odiai Hamber		3 allocated								
Date retired:	Police Pension N	0:									
Address:	- 1	Contact details:									
1 TOWN STRE	EET	Home telephone:	01423 1	23456							
HARROGATE			07980 654321								
NORTH YORKS	NORTH YORKS Other			Other telephone (state): 01423 223344 (COOCK)							
		Email 1: CLCONSVC	dala as a	al (sock)							
		Email 1: C.C.O.V.ID.V.O	WIE CO CA	91. WIV.							
Post Code: HG2 OAB	.	Email 2:									
Next of Kin - Name & relationship:		Next of Kin - Contact	Details:								
PETER CONSTA	BLE	0.771 12	3 456								
HUSBAND											
Dates to Avoid: (please include all lea	ave/holiday, Coun			xt twelve weeks):							
WARNED FOR COUN	27 2-4		23 MA	IR.							
Legal Claims: Have you any legal claims	s pending, or conte	mplated in your current trea	atment circumstanc	re: YES /NO							

PART 2 - To be completed by the applicant - Please indic	cate which of the following applies to you
----------------------------------------------------------	--------------------------------------------

	ork
At W	ork

On recuperative/	
restricted duties	

On sick leave

Other (specify)

y)												_									2							
"	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•

INJURED KNEE OURING OF	GICER SAFETY TRAINING						
What treatment have you already had for this condi	ition: e.g. medication/operation/physiotherapy/osteopath/						
SEEN GP - TAKING P	AINKILLERS PRESCRIBED						
B4 G.P.							
Physiotherapy: (if available, please bring with you any treatmen of benefit to our physiotherapists during your admission e.g. AC fracture, shoulder injury; other rehab guidelines);	t protocols or guidelines; X-rays / MRI scans/ rep[orts that may be L rehab detail; weight bearing details in the case of lower limb						
Have you attended the PTC before?: YES NO	If YES , when was your most recent attendance?						
	2004						
If YES, was it with the same or similar condition / a diffe	erent condition to the one you have now?						
DIFFERENT CONDITION	- BACK PAIN						
Personal Information: Personal information which you su example: To make admission and clinical decisions; for audi							
I understand that all personal information on this form will be confipersonal information or clinical reports will be shared without my	fidential to the professional and administrative staff of the PTC and no express consent unless required to do so by law.						
	I agree to include in any claim for damages pursued by me against the third party in respect of the accident resulting in my injury such sums as may be specified by The Police Treatment Centres as the costs of its provision of my treatment.						
In order to provide the best possible levels of service, updates have provided.	In order to provide the best possible levels of service, updates or other information I agree to the PTC contacting me using the details I have provided.						
I have supplied my most recent pay slip and one from at least six	months previously validating my regular donation to the PTC.						
Signature: A CONSVOIDLE Date: 17/3/11							
PART 3 – Signature of: Force Medical Officer <u>o</u> Physiotherapist <u>or</u> G.P.	<u>r</u> Occupational Health Nurse <u>or</u>						
Certified by (signature):	Print name: JOANNE CLARKE						
JOB TITLE: OCCUPATIONAL HEALTH &							
Address: NYP. OHU, GEORGE S							
Tel No: 01423 360606 Email:	3.						
PART 4 – To be completed by Force represent	ative / Police Federation Office:						
<u>Please note:</u> Treatment will not be provided free of charge if the applicant does not, or if retired did not, make the payroll giving donation to support the Charity. If you are unable to verify the applicant is (or was, in the case of a retired officer) a regular donor to the Charity, the applicant <u>MUST</u> provide two payslips, including the most recent and the other at least six months earlier, to the physiotherapy department otherwise treatment will not commence.							
The applicant is (or was, in the case of a retired officer) a reg							
Certified by (signature):							
Date: 21 3/11 Job Title: WELFARE							
Tel No: 01423 860606 Email:	4.						
Any other relevant information: $\bigcirc \ \bigcirc \ \bigcirc \ \leftarrow$							

Describe how your condition happened: e.g. accident/event at work/post-operative/long-term illness:



The Police Treatment Centres

Companion - Application to Accompany an In-Patient

PART 1 - To be completed by the companion (Please print in BLACK ink):

Surname: Fore	names:	Date of Birth:				
CONSTABLE	SARAH	4/12/74				
(Preferred Name: SARAH.)	Gender: M /F				
Address:	Contact details:					
23 VICTORIA STREET	Home telephone: OIGI					
MORPETH	Mobile telephone: .0796	8 456 789				
	Other telephone (state):					
Post Code: MO4 2TS	Email 1: SCONStabl	e@aol.com				
Name of the person you wish to accompany:						
Surname: CONSTABLE Forenames: ALEXANDER Date of Birth: 23/4/78						
Reason for request to accompany: Do you provide,	or require, some aspect of support	? If so please give full details				
MY HUSBAND NEET	IS ASSISTANCE	WITH				
PERSONAL HYGIENE MEDICATION	+ TAKING H					
Emergency Contact details: (e.g. next of kin – but NO	The person you wish to accompany):					
Name: SIMON CONSTABLE Relationship: SON Contact Details: 0191 123 456 / 07959 123 456						
Any analisis years requirements (a supplify issues		d as fire alamas. Mainht atal.				
Any specific room requirements: (e.g. mobility issues	; more than 6 leet tall; Hearing impaired	a – re iire aiarms; vveignt etc):				
Any special dietary requirements: (e.g. allergies or in	tolerances):					
VEGETARIAN						
Companion - Medical Conditions If any:	Date o	f Diagnosis:				
NONE.						
Companion - Medication/allergies/infections:						
HAYFEVER.						

Companion – Mobility and Access: Can / partial or non-weight bearing? Expand fully or		lease give distance. Are you a wheelchair user? Full aily basis and especially if at risk from falling:
TULLY MOBIL		,g.
Will anyone else be attending: e.g. deper	ndent children - Please give details	Name; Date of birth; medical condition (if any).
110		
	······································	
Details of any dependents medication/a	llergies/infections:	
N/A	27. 2 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Your GP's Details		
Dr. ALISTAIR W	USON	
[[- [- [- [- [- [- [- [- [- [EET, MORPETH
Address:	- 1 CINCE OIL	
202 1001		
Post Code: MOI 30Q.	1020	
Tel No: 0191 420 2		
Email: Surgery @ do	DENIGHT-WIN	
Personal Information: Personal information example: To make admission and clinical of		ay be used in a number of different ways, for al analysis; for fraud prevention.
I understand that all personal infor	mation on this form will be conf	idential to the professional and administrative
staff of the PTC and no personal		Il be shared without my express consent
unless required to do so by law.		
contacting me using the details I h	ave provided.	tes or other information I agree to the PTC
Signature: S COVO	rable	Date: 2 / 2 / 2010
Office Use Only:		
Date contact made by Nurse:		
Comments:		
Approved / NOT Approved:	Nurse Signature:	
	Name:	Date:



The Police Treatment Centres

Companion - Application to Accompany an In-Patient

PART 1 - To be completed by the companion (Please print in BLACK ink):

Surname: Fore	names:	Date of Birth:
	SARAH	
(Preferred Name: SARAH.)	Gender: M /F
Address:	Contact details:	
		5/78
23 VICTORIA STREET	Home telephone:	1 234 5678
MORPETH	Mobile telephone: 079	68 456 789
		,
	Other telephone (state):	
Post Code: MO4 2TS	Email 1: SCONStak	ole@aol.com
Name of the person you wish to accompany:		
Surname: CONSTABLE Forenames:	ALEXANDER Date	of Birth: 23/4/78
Reason for request to accompany: Do you provide,	or require, some aspect of suppor	t? If so please give full details
I SUFFER FROM MU	ILTIPLE SCIE	ROSIS AND
SO NEED DAILY F		
00 000 оптеч с	IECH PEONE IN	1 110001100
Emergency Contact details: (e.g. next of kin – but NOT	the person you wish to accompany):	
Name: SIMON CONSTABLE		
Contact Details: 0191 123 456	107959 12	23 456
Any specific room requirements: (e.g. mobility issues	_	그래, 그 네이트 아이들이 그 아이들이 아내가 되었다. 그 사람들이 사랑하는 이 아이들이 없다는 그 그 없다.
1 STRUGGLE WITH	STAIRS - WET	ROOM IF
Any special dietary requirements: (e.g. allergies or in	tolerances):	
UEGETARIAN.		
Companion - Medical Conditions If any:	Date of	of Diagnosis:
MULTIPLE SCLEROSIS		
Companies Madiation/superior		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Companion - Medication/allergies/infections:		
NONE.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

	n you climb stairs / walk unaided? Please give distance. Are you a wheelchair user? Full on assistance level if needed on a daily basis and especially if at risk from falling:
STRUGGEE WIT	소프로 프로그램 보다 가는 것이 있는 것이 되었다. 그런 보고 있는 것을 하게 되었다. 그 보고 있는 것은 보고 있는 것을 하는 것이 되었다. 그 보고 있는 것을 하고 있다. 그 보고 있는 것을 하는 것을
111111111111111111111111111111111111111	SE CRUTCHES
Will anyone else he attending: e g dene	endent children - Please give details, Name; Date of birth; medical condition (if any).
Details of any dependents medication/a	allergies/infections:
Parameter and a supplementary of the parameter and an extension of the supplementary of the s	
Control of the Contro	
Your GP's Details	
0118700	201
Dr. ALISTAIR WIL	
Address:	ERY, LIME STREET, MORPETH
Post Code: MOI 30Q.	
Tel No: 0191 420 2	
Email: Surgery a doc	cmail com
9 9	
Percenal Information: Dereand informa	ation which you cumply to up may be used in a number of different ways for
example: To make admission and clinical	ation which you supply to us may be used in a number of different ways, for decisions; for audit and statistical analysis; for fraud prevention.
I understand that all personal info	rmation on this form will be confidential to the professional and administrative
staff of the PTC and no personal	information or clinical reports will be shared without my express consent
unless required to do so by law.	
In order to provide the best po contacting me using the details I h	ossible levels of service, updates or other information I agree to the PTC
	-able Date: 2/2/2010
Signature	Date:
Office Use Only:	
Date contact made by Nurse:	
Comments:	
Approved / NOT Approved:	Nurse Signature:
Approved / NOT Approved.	Nurse Signature: Name: Date:
	Date.

Website: www.thepolicetreatmentcentres.org

The Police Treatment Centre St Andrews

Harlow Moor Road Harrogate North Yorkshire HG2 0AD

Tel: 01423 504448 **Fax:** 01423 527543

Email: enquiries@thepolicetreatmentcentres.org

The Police Treatment Centre Castlebrae

Castleton Road Auchterarder Perthshire PH3 1AG

Tel: 01764 664369 **Fax:** 01764 664598

Email: receptioncastlebrae@thepolicetreatmentcentres.org